

STRAFFI & STRAFFI, LLC

670 Commons Way
Toms River, NJ 08755
(732) 341-3800
Attorney for Plaintiff

In re:	) UNITED STATES BANKRUPTCY COURT
	) FOR THE DISTRICT OF NEW JERSEY
Eagle Roadways, Inc.)
)
Debtor(s).	) Case No. 21-10174
	) Chapter 7 Proceeding
)
Daniel E. Straffi, Trustee	) Adv. Pro.
)
Plaintiff,)
)
v.	) COMPLAINT TO DETERMINE THE
	) EXTENT, VALIDITY AND PRIORITY
	) OF LIENS, TO AVOID LIENS NOT
Global Merchant Cash, Inc., SevenOaks	) PROVEN AND FOR SURCHARGE
Capital Associates, LLC, United States	) UNDER §506 OF THE CODE.
of America, U.S. Small Business)
Administration, LG Funding, LLC,)
Complete Business Solutions Group Inc.,)
and Advance Merchant Services, LLC)
)
)
Defendant(s).)
)
)

Plaintiff, Daniel E. Straffi, Trustee for Debtor, Eagle Roadways, Inc., having offices located at 670 Commons Way, Building I, Toms River, New Jersey, by way of Complaint against Defendants, Global Merchant Cash, Inc., SevenOaks Capital Associates, LLC, United States of America, U.S. Small Business Administration, LG Funding, LLC, Complete Business Solutions Group Inc., and Advance Merchant Services, LLC says:

FIRST COUNT

1. This Chapter 7 proceeding is brought pursuant to Bankruptcy Rule 7001. Venue is proper in this Court pursuant to 28 U.S.C. §1409(a). This Court has jurisdiction in this proceeding pursuant to 28 U.S.C. §157 and §1334. This is a core proceeding pursuant to 28 U.S.C. §157(b)(2)(K),

2. The Debtor filed a voluntary petition under Chapter 11 of the United States Bankruptcy Code on January 11, 2021. The case was converted to Chapter 7 on March 18, 2021. The plaintiff, Daniel E. Straffi was appointed Chapter 7 Trustee on March 18, 2021.

3. At the time of filing the petition the debtor had an interest in bank accounts at Wells Fargo and JPMorgan Chase Bank, N.A., and motor vehicles hereinafter referred to as “property of the estate”.

4. The following Defendant(s) are made parties because each may have a lien on property of the estate the extent, validity and priority of which are unknown to the Trustee:

(a) Defendant, LG Funding, LLC filed a UCC Financing Statement of December 31, 2019;

(b) Defendant, Advance Merchant Services, LLC by its agent, Corporate Services Company filed a UCC Financing Statement on January 9, 2020;

(c) Defendant, SevenOaks Capital Associates, LLC filed a UCC Financing Statement on March 26, 2020;

(d) Defendant, United States of America, U.S. Small Business Administration filed a UCC Financing Statement on May 25, 2020;

(e) Defendant, Global Merchant Cash, Inc. filed a UCC Financing Statement on January 12, 2021; and

(f) Defendant, Complete Business Solutions Group, Inc. filed a UCC Financing Statement on January 25, 2021.

Copies of the aforesaid Financing Statements are annexed as Exhibit "A".

5. The liens described above may be invalid or subordinate as to the Trustee under applicable provisions of the United States Bankruptcy Code inasmuch as inter alia said liens, upon information and belief, may have not been perfected before the filing of the bankruptcy petition or have been paid but not satisfied of record or may be post petition transfers.

6. It is in the best interest of the estate that the Court may determine the extent, validity and priority of liens on the property of the estate.

WHEREFORE, Plaintiff demands judgment as follows:

(a) that this Court may determine the extent, validity and priority of liens of each of the Defendant(s). That upon failure of defendant(s) to answer the Complaint and prove it here, that a judgment be entered that Defendant(s) has no lien on the property of the estate or the proceeds thereof; and

(b) for such other relief as is just and proper.

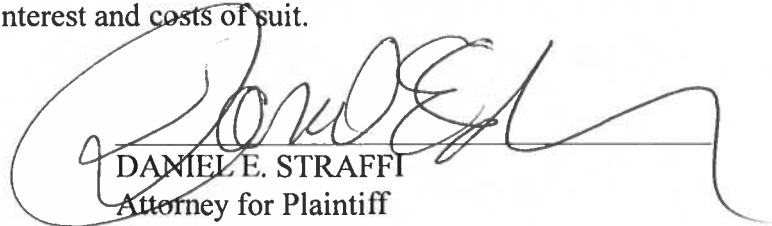
SECOND COUNT

7. The Plaintiff repeats the obligations of the preceding paragraphs as if set forth herein verbatim.

8. If the Court determines that a Defendant has a valid priority lien on the property of the estate, then the Plaintiff is entitled to recover from the property of the estate the reasonable, necessary costs and expenses of preserving or disposing of such property as provided under §506 of the United States Bankruptcy Code.

WHEREFORE, Plaintiff demands judgment in an amount to be determined by the Court for the reasonable necessary costs and expenses of preserving or disposing of the property against Defendant(s) with interest and costs of suit.

Dated: 10/12/22


DANIEL E. STRAFFI
Attorney for Plaintiff

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)	
Lien Solutions	8003313282
B. E-MAIL CONTACT AT FILER (optional)	
uccfilingreturn@wolterskluwer.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 US	

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

Filing Number: 53779632

12/31/19 16:23:01

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here ☐ and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME				
EAGLE ROADWAYS INC				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS	CITY		STATE	POSTAL CODE COUNTRY
4 TULIP DR APT 1F	FORDS		NJ	08863 US

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY		STATE	POSTAL CODE COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY) Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME				
LG Funding LLC				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE COUNTRY
1218 Union St.	Brooklyn		NY	11225 US

4. COLLATERAL. This financing statement covers the following collateral:
assigns and grants to LG Funding a continuing security interest in all of personal property of every kind and nature, including, without limitation, all accounts, contract rights, rights to the payment of money, insurance claims and proceeds, chattel paper, electric chattel paper, documents, instruments, securities and other investment property, deposit accounts, supporting obligations of every nature, and general intangibles, including without limitation, customer lists, and all books and records related thereto, and all recorded data of any kind and any nature, regardless of the medium of recording; together with, to the extent not listed above as the original collateral, all substitutions and replacements for and products of any of the foregoing property, and together with proceeds of any and all of the foregoing property.

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is		<input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and instructions)		<input type="checkbox"/> being administered by a Decedent's Personal Representative	
6a. Check <u>only</u> if applicable and check <u>only</u> one box:					
<input type="checkbox"/> Public-Finance Transaction	<input type="checkbox"/> Manufactured-Home Transaction	<input type="checkbox"/> A Debtor is a Transmitting Utility		<input type="checkbox"/> Agricultural Lien	<input type="checkbox"/> Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessor/Lessee <input type="checkbox"/> Consignor/Consignee <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailor/Bailee <input type="checkbox"/> Licensee/Licensee					
8. OPTIONAL FILER REFERENCE DATA: 73168496					

UCC FINANCING STATEMENT (Form UCC1) (Rev. 04/2011)

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 8008585294	
B. E-MAIL CONTACT AT FILER (optional) filingdept@cscinfo.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) Corporation Service Company 801 Adlai Stevenson Drive Suite 100 Springfield, IL 62703 US	

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

Filing Number: 53794512

01/09/20 14:59:05

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1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME EAGLE ROADWAYS INC				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
370 NEW BRUNSWICK AVE	FORDS	NJ	08863	US

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME CORPORATION SERVICE COMPANY, AS REPRESENTATIVE				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
P.O. BOX 2576, UCCSPREP@CSCINFO.COM	SPRINGFIELD	IL	62708	US

4. COLLATERAL: This financing statement covers the following collateral:

All Assets now owned or hereafter acquired and wherever located, including but not limited to, the following subcategories of assets: a. Accounts, including but not limited to, credit card receivables; b. Chattel Paper; c. Inventory; d. Equipment; e. Instruments, including but not limited to, Promissory Notes; f. Investment Property; g. Documents; h. Deposit Accounts; i. Letter of Credits Rights; j. General Intangibles; k. Supporting Obligations; and l. Proceeds and Products of the foregoing. NOTICE PURSUANT TO AN AGREEMENT BETWEEN DEBTOR AND SECURED PARTY, DEBTOR HAS AGREED NOT TO FURTHER ENCUMBER THE COLLATERAL DESCRIBED HEREIN, THE FURTHER ENCUMBRANCE OF WHICH MAY CONSTITUTE THE TORTIOUS INTERFERENCE WITH THE SECURED PARTY'S RIGHT BY SUCH ENCUMBRANCE IN THE EVENT THAT ANY ENTITY IS GRANTED A SECURITY INTEREST IN DEBTOR'S ACCOUNTS, CHATTEL PAPER OR GENERAL INTANGIBLES CONTRARY TO THE ABOVE, THE SECURED PARTY ASSERTS A CLAIM TO ANY PROCEEDS THEREOF RECEIVED BY SUCH ENTITY.

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative	
6a. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor Is a Transmitting Utility	
6b. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing	
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licensor	
8. OPTIONAL FILER REFERENCE DATA: Optional Filer Reference	

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)	
Terri Crifasi	2257571919
B. E-MAIL CONTACT AT FILER (optional)	
terri@sevenoakscapital.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
<div> <div>Terri Crifasi</div> <div>7854 Anselmo Lane</div> <div>Baton Rouge, LA 70810</div> <div>US</div> </div>	

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

Filing Number: 53932662

03/26/20 16:52:44

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1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); If any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME				
Eagle Roadways Inc				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE COUNTRY
370 New Brunswick		Ford	NJ	08863 US

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); If any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME				
SevenOaks Capital Associates LLC				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS		CITY	STATE	POSTAL CODE COUNTRY
7854 Anselmo Lane		Baton Rouge	LA	70810 US

4. COLLATERAL: This financing statement covers the following collateral:
Collateral - all assets of the debtor. Notice - pursuant to an agreement between debtor and secured party, debtor has agreed not to grant a security interest in the collateral, described herein, and in any future commercial tort claims to any other secured party. Accordingly, the acceptance of any such security interest by anyone other than the above secured party is likely to constitute the tortious interference with the secured party's rights. In the event that any entity is granted a security interest in debtor's accounts, chattel paper or general intangibles contrary to the above, the secured party asserts a claim to any proceeds thereof received by such entity.

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative	
6a. Check <u>only</u> if applicable and check <u>only</u> one box:	
<input type="checkbox"/> Public-Finance Transaction	<input type="checkbox"/> Manufactured-Home Transaction
<input type="checkbox"/> A Debtor is a Transmitting Utility	<input type="checkbox"/> Agricultural Lien
<input type="checkbox"/> Non-UCC Filing	
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessor/Lessor <input type="checkbox"/> Consignor/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailor/Bailor <input type="checkbox"/> Licensor/Licensor	
8. OPTIONAL FILER REFERENCE DATA:	

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 8008585294	
B. E-MAIL CONTACT AT FILER (optional) filingdept@cscinfo.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) Corporation Service Company 801 Adlai Stevenson Drive Suite 100 Springfield, IL 62703 US	

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

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1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here ☐ and provide the Individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME EAGLE ROADWAYS INC				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 860 KING GEORGE RD STE 2B		CITY FORDS	STATE NJ	POSTAL CODE 08863
			COUNTRY US	

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide the Individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
			COUNTRY	

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME U.S. Small Business Administration				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 2 North Street, Suite 320		CITY Birmingham	STATE AL	POSTAL CODE 35203
			COUNTRY US	

4. COLLATERAL: This financing statement covers the following collateral:
All tangible and intangible personal property, including, but not limited to: (a) inventory, (b) equipment, (c) instruments, including promissory notes (d) chattel paper, including tangible chattel paper and electronic chattel paper, (e) documents, (f) letter of credit rights, (g) accounts, including health-care insurance receivables and credit card receivables, (h) deposit accounts, (i) commercial tort claims, (j) general intangibles, including payment intangibles and software and (k) as-extracted collateral as such terms may from time to time be defined in the Uniform Commercial Code. The security interest Borrower grants includes all accessions, attachments, accessories, parts, supplies and replacements for the Collateral, all products, proceeds and collections thereof and all records and data relating thereto. The collateral set forth herein is within the scope of Article 9 of the New Jersey Uniform Commercial Code, pursuant to 12A:9-102 and 12A:9-109 661949 7405

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, Item 17 and instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative				
6a. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility			6b. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing	
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailor/Bailor <input type="checkbox"/> Licensee/Licensee				
8. OPTIONAL FILER REFERENCE DATA:				

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)	
Lien Solutions	8003313282
B. E-MAIL CONTACT AT FILER (optional)	
uccfilingreturn@wolterskluwer.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 US	

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
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Filing Number: 54995413

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1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME						
OR	1b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
	SINGH		BHUPINDER			
1c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
69 Wilk Road			Edison	NJ	08837	US

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME						
EAGLE ROADWAYS INC						
OR	2b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
370 New Brunswick Avenue, #229			Ford	NJ	08863	US

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME						
GLOBAL MERCHANT CASH INC						
OR	3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
64 BEAVER STREET, STE 415			NEW YORK	NY	10004	US

4. COLLATERAL: This financing statement covers the following collateral:
4.1. ASSETS

5. Check only if applicable and check only one box: Collateral is ☐ held in a Trust (see UCC1Ad, item 17 and instructions) ☐ being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

☐ Public-Finance Transaction ☐ Manufactured Home Transaction ☐ A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:

☐ Agricultural Lien ☐ Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

78497678

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) COMPLETE BUSINESS SOLUTIONS GROUP, INC.		2156003880
B. E-MAIL CONTACT AT FILER (optional) LEGAL@PARFUNDING.COM		
C. SEND ACKNOWLEDGMENT TO: (Name and Address) [COMPLETE BUSINESS SOLUTIONS GROUP, INC.] 22 N. 3RD STREET PHILADELPHIA, PA 19106 US		

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

Filing Number: 55015981

01/25/21 15:11:11

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1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	SINGH	BHUPINDER		
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
69 WILK ROAD	EDISON	NJ	08837	US

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
EAGKE ROADWAYS				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
860 KING GEORGE ROAD	FORDS	NJ	08863	US

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME				
COMPLETE BUSINESS SOLUTIONS GROUP, INC.				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
22 N. 3RD STREET	PHILADELPHIA	PA	19106	US

4. COLLATERAL: This financing statement covers the following collateral: THIS FILING IS TO INDICATE, AND NOTIFY OF, COMPLETE BUSINESS SOLUTIONS GROUP, INC. D/B/A PAR FUNDING ("CBSG")'S ABSOLUTE PURCHASE OF RECEIVABLES/ACCOUNTS RECEIVABLE OF DEBTOR, SUCH THAT CBSC IS THE PRESENT AND ABSOLUTE OWNER OF SUCH RECEIVABLES/ACCOUNTS RECEIVABLE. IN CONNECTION WITH CBSC'S PURCHASE OF DEBTOR'S RECEIVABLES/ACCOUNTS RECEIVABLE, DEBTOR HAS ALSO GRANTED CBSC A SECURITY INTEREST IN THE FOLLOWING THAT DEBTOR NOW OWNS OR SHALL ACQUIRE OR CREATE IMMEDIATELY UPON THE ACQUISITION OR CREATION THEREOF: ACCOUNTS, GENERAL INTANGIBLES, ANY AND ALL PROCEEDS AND PROFITS OF ANY OF THE FOREGOING OR PROPERTY DERIVED THEREFROM INCLUDING BUT NOT LIMITED TO INSURANCE PROCEEDS.

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, Item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative	
6a. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing	
6b. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licenser	
7. ALTERNATIVE DESIGNATION (if applicable):	
8. OPTIONAL FILER REFERENCE DATA:	